PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

anneanriate All further cor	respondence including the below or directed otherwise	Patent advance or	ders and notificat	tion of maintenance fees	will be mailed to the currents; and/or (b) indicating a sep	t correspondence address as	
	E ADDRESS (Note: Use Block 1 for	any change of address)		Fee(s) Transmittal. The papers. Each addition	mailing can only be used the certificate cannot be used all paper, such as an assignment of mailing or transmission.	for any other accompanying	
20792 75	90 05/18/2006	/	SIPE		U	emission	
MYERS BIGEL SIBLEY & SAJOVEC PO BOX 37428 RALEIGH, NC 27627			UL 1 2 2006	I hereby certify that the States Postal Service addressed to the Ma transmitted to the USI	Certificate of Mailing or Transmission ereby certify that this Fee(s) Transmittal is being deposited with the United ttes Postal Service with sufficient postage for first class mail in an envelope dressed to the Mail Stop ISSUE FEE address above, or being facsimile nsmitted to the USPTO (571) 273-2885, on the date indicated below.		
						(Depositor's name)	
			PADEMARK			(Signature)	
			• •			(Date)	
APPLICATION NO.	FILING DATE	1	FIRST NAMED IN	VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/764,616	01/17/2001	James Russell Godwin			5577-219	7872	
	METHODS, SYSTEMS CLUSTER COMPUTING		ER PROGRAM	PRODUCTS FOR SEC	URITY PROCESSING OU	TBOUND	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	08/18/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
COULTER, KENNETH R		2141		709-229000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Myers Bigel Sibley & Sajovec, P.A. 3				
	RESIDENCE DATA TO B			• • •			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
International Business Machines Corporation Armonk, New York 10504							
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the patent	i): Individual X C	orporation or other private gr	oup entity Government	
A. The following fee(s) are enclosed: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0461 (enclose an extra copy of this form).				
. Change in Entity Status	(from status indicated above	e)					
4.4	MALL ENTITY status. See				LL ENTITY status. See 37 C		
The Director of the USPTO NOTE: The Issue Fee and Punterest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ne Fee and Publicat will not be accepted ent and Trademark	tion Fee (if any) or I from anyone othe Office.	r to re-apply any previous er than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	David K	Pl		Date	FABE TARE LEMES BOODDESS	090461 09764616	
Typed or printed name	David K. Purks	<i></i>		VI I C. Registration			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.